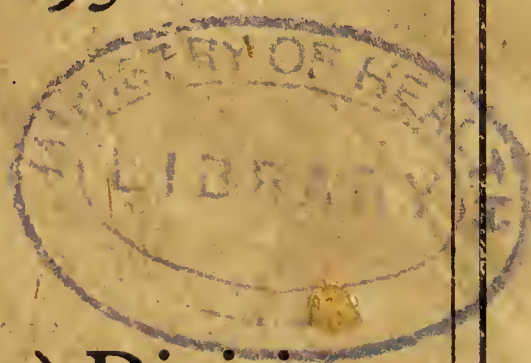


Library.

ANNUAL REPORT

For the Year 1952.



No. 2 (North Craven) Division

Comprising :

Bowland Rural District.

Sedbergh Rural District.

Settle Rural District.

**By D. P. LAMBERT, M.D., D.T.M. & H.
D.P.H.,**

Divisional Medical Officer.

**And the Senior Sanitary Inspectors, Bowland, Sedbergh,
and Settle Rural Districts.**

SKIPTON :

**PRINTED BY THE ELLESMERE PRESS LIMITED,
ALBERT STREET,
1953.**

To the Chairman and Members, Bowland Rural District Council.
To the Chairman and Members, Sedbergh Rural District Council.
To the Chairman and Members, Settle Rural District Council.
To the County Medical Officer.

Gentlemen,

I have the honour to present my report on the health of No. 2 (North Craven) Division for the year 1952.

“Did men take every method to avoid diseases, they would seldom need the physician ; it is hard to say if more lives are not lost by people trusting to medicine, and neglecting their own endeavours, than all that are saved by the help of physic”.

Dr. Wm. Buchan, 1769.

SOCIAL CONDITIONS

The character of the Division, the one wholly Rural Division in the West Riding, remains unchanged. Its preoccupation is with farming, and it has been a fairly good year. Winter was short and not very severe, spring and early summer were warm and there were no late frosts. It was an exceptionally good lambing-time, and on some farms a hay crop was taken before the end of May. Those who took their hay crop early were fortunate, for from mid-June the weather deteriorated and a dull wet summer followed a spring of unusual promise. The later hay crop was troublesome to get, and a good deal of poor quality hay was stored. Autumn was wet, and there were early frosts ; winter seemed to follow hard on its heels. In an arable district this would have been serious ; but where the main forms of agriculture are dairying, stock rearing, and the pasture of sheep there were few ill effects ; grass grew well and on most farms beasts began the winter in good condition.

The prosperity of farming and in some degree its character depends on Government support and on Government policy. When milk production became more profitable than stock rearing many farmers who had never considered dairying before adapted their methods and went in for it, sometimes in quite unsuitable premises. Though beef production is now more profitable there has been no tendency to abandon dairying, the monthly milk cheque is too attractive, but on many farms more calves are being kept. In spite of repeated promises from both political parties some of the older farmers are not happy about the industry's dependence on Government support. Country folk have longer memories than politicians.

A greater anxiety is the shortage of farm labour. Men, particularly young men, are drawn to the towns by higher wages and easier work, and by pleasures bought for a price ; are drawn too by better housing, better sanitation, and more accessible social

services. Farmers and farm workers are less willing to be told that what was good enough for their fathers is good enough for them, or if they are prepared to put up with things themselves, they are determined that their children shall not have to. There is a particularly strong demand for medical services. In spite of improvements in transport, for the farmer in busy seasons, and for the mother with young children at all times, remote facilities might as well not exist. If country people are to share in the benefits of the Welfare State the Mahomets of the New Creed will have to move to the mountains. Health centres could probably do more useful work in remote districts than they could in towns, particularly if they were linked with the diagnostic facilities of the hospitals. Hospitals deal splendidly with catastrophes ; but the catastrophe has to happen first. It could often have been prevented.

The effects of the rising cost of living have been unhappily felt, particularly in Settle where there has been considerable unemployment in the textile industry ; and where the tourist trade, always a sensitive index of prosperity, has had a bad year. Money has been tight all round, and the abominable snowmen of the Treasury have left cold footprints on more than one promising scheme of development.

This year, at the request of the Ministry of Health, a report on the National Health Service has been included in the Annual Report. The points discussed are those on which the Ministry particularly wished to be informed. The report will be found on page 7. In reading it, it would be well to remember the duties laid on the National Health Service by Statute : "to secure improvement in the physical and mental health of the people, and the prevention, diagnosis and treatment of illness".

VITAL STATISTICS

Once again the absolute figures have been given, and once again I particularly call attention to the number of accidental deaths. Most accidents are preventable ; and no apathy, no ignorance, no carelessness, no irresponsibility and no vested-interest should be allowed to interfere with their prevention. Figures interest few people, and they impel fewer to action: figures are clean and tidy, they do not bleed, no one weeps for them ; but they represent mangled bodies and women who will not be comforted.

The importance of heart disease and apoplexy as causes of death needs no emphasis. When they come at the end of a long and useful life they are natural and cause no concern ; but when they come to men and women in their full vigour, as coronary disease often does, they are a challenge to social and particularly to medical complacency.

Similarly with cancer, another disease that often takes people in the strength of their middle life ; is enough thought being given to its problems, enough energy to its control ?

Details are shown in Appendix VI.

SANITARY CONDITIONS

Changes have been small, but in all branches of the work except one they have been in the right direction. That branch is the one dealing with unfit houses. Some landlords do what they can, but more do nothing, resigned to seeing their property fall into decay. Some who might be willing to make improvements cannot afford to. One cottage visited recently would cost not less than £1,500 to put into a fit state of repair. The rent is 1/9d. per week. The landlord would be glad to close it as a cottage and use it for storage, but does not want to put the tenant out. The tenant cannot afford the rent of a council house, though his children would gladly pay it, and sturdily refuses to leave a house, bad though it is, where he can feel independent.

The Senior Sanitary Inspectors' reports follow at Page 17. I have been grateful through the whole year for their help and co-operation. In comparing the figures printed in the Statistical Abstract at the end of their Reports it should be borne in mind that staffing and the allocation of duties to staffs differs in each district.

WATER SUPPLIES

Constant watch is kept on water supplies, and regular bacteriological analyses are made. In this, as in many other matters, the co-operation of The Public Health Laboratory has been invaluable. I cannot sufficiently emphasise the importance for Public Health of regular water sampling coupled with regular inspections.

Bowland : The Regional Water Scheme, long prepared and long discussed, still awaits Ministry approval. Until the Scheme comes into operation, I shall feel that an outbreak of typhoid fever is always a possibility, a remote one perhaps, but still a possibility.

Sedbergh : Chlorination of the Dent Water Supply is now being carried out.

Settle : The Helwith Bridge water supply scheme was completed during the year, but the Thornton-Westhouse-Masongill Scheme is still obstructed by legal difficulties. At Burton in Lonsdale, the water supply has been better since the Company carried out certain works : but occasional brief failures still happen, and on one occasion heavy agricultural pollution made the water all but undrinkable.

SEWERAGE AND DRAINAGE

Bowland : The river protection works at Grindleton are still holding firm. A scheme for the sewerage of West Bradford was put up during the year, but sanction was obtained for only a small part of it. Negotiations on this project are still being conducted. Slaidburn and Newton in Bowland are still in need of sewerage.

Sedbergh : Plans have been made for a small sewage disposal scheme at Dent, but work has not begun. Improvements to the Sedbergh works are being planned.

Settle : A limited scheme for sewerage works at Horton in Ribblesdale has been approved, but discussions with the Ministry are still going on. Sewage disposal in Malhamdale is still being considered : the present arrangements leave much to be desired.

Refuse Disposal : Fires on tips have been troublesome again. Measures to control rat infestation on tips have been successfully taken.

HOUSING,

There is as great a need to sweep away rural slums as there is to sweep away the horrors of the industrial zones. A horror is no nicer to live in because it happens to look out on green fields, with a pail closet at the bottom of the garden and water to fetch from two hundred yards. Some of these houses may be picturesque, but to purchase pleasure for the eye at the expense of the people who live in such places is to buy pleasure too dearly. Such old properties can be reconditioned, at a cost. I am glad that a Housing Society has been set up which proposes to buy old houses and make them fit for habitation, with the needs of elderly people particularly in mind. This is a doubly useful service. Many old people live in large houses which are a burden to them, and would be glad to get a small place of their own and let someone with a large family occupy the big house.

Bowland : Progress in building has continued, and one landlord has completed the most encouraging bit of reconditioning I have seen for a long time : an example that many would be wise to follow.

Sedbergh : The urgent need for rehousing the people on the Maryfell and Pinfold estates is well realised ; progress has been made, and plans are well forward for the large scale schemes which alone can meet that need. When this task has been successfully completed it will be possible to do more about old unfit houses.

Settle : There is a greater concentration of unfit houses here than in the other districts, particularly in Upper Settle. Perhaps some houses ought to be preserved as historical or architectural mon-

uments, but not as houses for people to live in ; some ought to be reconditioned, and some are past saving and will have to be pulled down. It is hoped that there will be co-ordination in all these things, and in particular that any new building will be such as will add to the beauty of a unique site.

HYGIENE OF FOOD

Milk : Close co-operation with the Veterinary Officer of the Ministry of Agriculture has again proved its value. Notices requiring milk from certain cows to be pasteurised were served on two farmers. These men had bought the cows in good faith, unaware of the fact that they were part of a herd the milk from which was heavily infected with tubercle bacilli. The infection of this milk was detected in Division 4. The herd was sold twice in quick succession, and then sold again to a dealer in this Division, who dispersed it, most of the beasts going for slaughter. I am indebted to my colleague in Division 4 for unravelling this story, and for most promptly telling me about it.

Meat : The results of meat inspections are tabulated later.

Food Handling : There have been small improvements, and education and persuasion are going on all the time. Outward cleanliness is most desirable, but it has yet to be learned that food can look clean and be attractively served, and still be dangerous. Until it becomes automatic for everyone who handles food to wash his hands frequently and in particular after every visit to the toilet ; and for everybody to wash his hands before a meal the risk of food borne infections will not grow much less.

INFECTIOUS DISEASE

There were few outbreaks of Infectious Disease during the year, none serious and none widespread, 163 cases were notified as against 430 cases last year. Measles broke out in Gisburn in March and spread in the next two months through the adjacent parishes in the Ribble Valley. No cases were reported from the Hodder Valley, but I have reason to believe that this is because no cases were notified, not because none occurred. There was also an outbreak of measles in Settle in May, but cases were few, and the epidemic did not spread far. After the outbreak of the previous year, there were few susceptible children.

Whooping cough was widely, but not epidemically present in the whole Division, though there was a small local outbreak in and around Bentham in May, June, and July, probably spread in school.

There was an unusual prevalence of scarlet fever ; all cases were mild, and few could be traced to contact with another case of scarlet fever, except in a sharp outbreak in Bentham in December ; where an undiagnosed child attending school infected many class mates.

Of the less usual infectious diseases, there was one fatal case of meningococcal meningitis in an infant. No case of poliomyelitis, that over publicised disease, was recorded. There was no diphtheria and no typhoid fever.

Except from one doctor in Bowland and from one in Settle notification of Infectious Disease has been reasonably good, though in some cases greater promptness in notification would have been welcome. My first information about the case of meningococcal infection came from the parents of the child, who rang up four days after its death to ask when their house was going to be disinfected.

Tuberculosis : During the year 30 cases of pulmonary tuberculosis were notified, of whom 20 were infected locally and 10 outside the Division. 7 cases of non-pulmonary tuberculosis were notified, all but one locally infected, probably from raw milk. A mass radiography Survey was carried out in parts of Settle District in September. Four active cases were detected by this means, and later notified.

A Tuberculosis Dispensary is open at 54, Keighley Road, Skipton, on Mondays, Thursdays and Fridays from 10 a.m. to 12 noon. A clinic is also held at Dr. D. B. Hyslop's surgery in Settle on the first Wednesday of each month. Tuberculosis visiting is carried out by the Health Visitors. The Chest Physician, Dr. W. D. Hamilton, sympathises with the preventive side of Tuberculosis work.

Veneral Disease : There is little Veneral Disease in this Division. During the year, only 1 new case has come under treatment. A Social Worker in Venereal Disease is shared with three neighbouring Divisions.

There are Venereal Disease Clinics at the Victoria Hospital Keighley, and at the Victoria Hospital, Burnley, open as follows :

Keighley : Men — Thursday. 5 — 7-30 p.m.
Women and Children — Thursday. 5 — 7-30 p.m.
Burnley : Men — Mondays and Thursdays. 5-30 — 6-30 p.m.
Women and Children — Mondays 10 — 11 a.m.
Fridays 11 — 12 a.m. and
5-30 — 6-30 p.m.

The following general practitioners undertake the treatment of Venereal Disease :

Dr. D. B. Hyslop, Linton Court, Settle. Tel. Settle 2100.
Dr. D. Scott-Jackson, Briarwood, Sedbergh. Tel. Sedbergh 18

THE NATIONAL HEALTH SERVICE

That the aims of the National Health Service are worthy aims few will dispute ; and that its' most evident achievement, making medical skill available to all who need it without respect of income or of social standing, is also good is another proposition of wide acceptance. Before the Appointed Day, the needs of the insured wage-earner were catered for on an austere but adequate level ; his children and his wife, particularly his wife, often went short of medical care because they could not afford it. In cities and large towns the great hospitals helped, and in town and country both there have always been doctors who attended the poor without fee ; but much illness was never made known, or went untreated because remedies cost too much, or because mothers have not time to be ill. To measure the biological value of free medical treatment the Vital Statistics for married women of Social Classes IV and V in the Registrar-General's classification should be compared with those of their husbands before and after the passing of the National Health Service Act. If there are detectable differences they will be found there ; though it may be many years before they are plain to see. The cycles of biology are generations, not years and months.

Having granted so much it is fair to ask two questions : Does the National Health Service carry out all its lawful tasks ? and does it carry them out economically ? To both questions the honest answer is "No". Much money is spent on treating illness, some of it diagnosed, some of it not ; but for the improvement of health and for the prevention of illness — the Service's first and most important tasks—money is grudged. It is as if the owner of a fleet of lorries ran up large bills for breakdown services and major repairs, and "saved" on lubrication. It is gross folly to spend pounds in treating illnesses that could have been prevented for pence. Prevention is not merely better than cure, it is cheaper, by a long way.

This would be clearer if the National Health Service were a single service, not three separate and by no means well co-ordinated services. Money spent by Local Authorities on immunisation and vaccination is shown in their accounts as an unrewarded expense. It saves hospital beds, but the saving is shown in the books of The Regional Hospital Board. Money similarly spent on Child Welfare means fewer calls on General Practitioners, and fewer prescriptions for drugs ; but the Executive Councils are the gainers, not the Local Authority. Nothing in recent legislation has been so unfortunate as the splitting of the National Health Service into three. There is an essential unity in Medicine, and unless that unity is reflected in the organisation of the service that deals with it, there will be, and now is, waste, unbalance, and

loss of efficiency. It will be very difficult to put matters right. Immense vested interests have been created, particularly in hospital treatment ; and the opposition to unification of the Service will be correspondingly great.

Another unfortunate feature of the present organisation is the creation of bodies — Regional Hospital Boards, Hospital Management Committees, Executive Councils — elected by and responsible to neither tax payer nor rate payer ; but given authority to spend, literally, hundreds of millions of pounds. The system may have merits, but economy is not one of them.

No. 2 (North Craven) Division of the West Riding is made by the Rural Districts of Bowland, Sedbergh and Settle. The Divisional Medical Officer is ex officio Medical Officer of Health to all three Rural Districts and combines in his person the local administration of all Local Authority Health Services, major as well as minor, acting as regards the former under the direction of the County Medical Officer, and ultimately of the West Riding County Council, and as regards the latter under the direction of the three Rural District Councils. He has the assistance of an Assistant County Medical Officer, and of an office staff. There are two hospitals in the Division, one for Mental Defectives, the other a former Isolation Hospital, now designated for the reception of chronic cases and as a small (5 bed) maternity unit. At present it is lying empty. Both are controlled by No. 14, Bingley, Keighley, Skipton, Settle Management Committee, under Leeds Regional Hospital Board. General and Special Hospitals outside the Divisional Boundary but under the same Regional administration, and others in the area of the Manchester Regional Hospital Board serve the population of this Division. There are 13 resident General Practitioners, and at least an equal number of practitioners who live outside the divisional boundary treat cases within it. Sedbergh School has a wholetime school doctor.

Co-ordination and Co-operation : Except by personal contact with individuals — a large exception — there is little co-ordination between the branches of the N.H.S. The Divisional Medical Officer has been invited to attend meetings of the local H.M.C. sub-committee on Maternity accommodation when matters of concern to his area have been discussed, and has accepted all such invitations. He is a member of the Sub-committee on the recruitment of medical personnel for Civil Defence, but its meetings are so timed that he is unable to attend them. One General Practitioner is a member of the H.M.C. Another is a member of the Leeds Regional Hospital Board, and Chairman of Settle R.D.C. Public Health Committee. The results of these measures are unimpressive. Committee meetings, though socially pleasant, throw into relief strongly opposed conceptions of the National Health Service, but do not reconcile them ; and it is a sad reflection that the Chairman of the Settle Public Health Committee advises his patients not to make use of the Local Authority Clinics and fails to notify cases of infectious

disease. When every patient who attended a clinic could be regarded as a financial loss to the local doctors such an attitude was understandable ; its persistence under radically changed conditions commands less sympathy. Failure to notify cases of infectious disease requires no comment.

The nurse-midwives work under the direct orders of the family practitioners, and come under the Local Authority only for supervision, the preparation of reports and returns, and the payment of wages. On the whole co-operation is good, though personal frictions have occurred from time to time, but not seriously enough to prejudice the successful working of the scheme. The nurse-midwives are available to Hospitals for after-treatment, but are seldom used for that purpose. Health Visitors are likewise available, and are as infrequently employed. There is, with a few exceptions, no co-operation between the Health Visitors and general practitioners. In some cases their relationship is one of scarcely veiled hostility. There are faults on both sides. Full-time Health Visiting is new in this Division. When it was fitted in, other work permitting, by the nurse-midwives who knew and were known to the local doctors there was little difficulty ; but little real Health visiting was carried out. Few practitioners know what a Health Visitor is for, or try to use her services ; and some Health Visitors have been known to carry professional independence to the point of telling a mother where her doctor went wrong. The conception of team work, and of what it implies, is not fully grasped on either side.

New Local Authority Services are notified to the Public by advertisements in the local Press and by display of notices, and to practitioners by private letter. From time to time reminders are published, usually as part of a Health Education Campaign. A copy of this Annual Report is sent to all resident practitioners, and I enclose a copy of a publication which was sent to all householders : "Meet your County Council". — Enclosure to Ministry of Health only.

Joint use of Staff : One general practitioner works on a sessional basis in one Child Welfare Centre, and another in two centres. One of the Regional Hospital Board's Chest Physicians works as Tuberculosis Officer in this and in three neighbouring Divisions. The Assistant County Medical Officer attends once a month as an observer at the nearest pediatric clinic. Children are referred for specialist opinion through their own doctors, or, where these consent, direct, but the County Council has its own full time ophthalmologist, who consults once a month in this Division.

Health Visitors supply reports to the Hospital Management Committee bed-booking bureaus on the social circumstances of all applicants for maternity beds. Similar reports on the aged and the

chronic sick are supplied if asked for, but as a rule the general practitioners supply this information. All Health Visitors undertake the care and aftercare of Tuberculosis patients, and one designated Health Visitor attends the Tuberculosis clinic in Settle. A social worker in Mental Health is shared with Division 1. She gives reports on social and family conditions to Mental Hospitals when these are asked for. A social worker in Venereal Disease is shared with three neighbouring Divisions. Two local practitioners undertake the treatment of V.D.

Voluntary Organisations : No voluntary organisation is employed directly, but regular close co-operation is maintained with four local associations for the care of the Aged. When need arises co-operation is arranged with the N.S.P.C.C. for neglected children ; with the Diocesan Moral Welfare Association for unmarried mothers and their children, or with similar religious associations ; and with the National Association for the Prevention of Tuberculosis, the National Association for Mental Health, the National Institute for the Deaf, Blind Aid Societies, and the Central Council for Health Education in their respective fields of interest.

Ante-natal care : Most expectant mothers prefer to be seen in their homes by their own doctors. The Nurse-Midwives also carry out routine ante-natal examinations. An Ante-natal clinic is open in Settle at the Divisional Health Office on alternate Tuesdays. Attendances have been small, but the clinic is justified by the nature of the work done there. Few practitioners seem to test the blood of their patients for Rhesus factors, or to weigh their patients regularly. A class in relaxation exercises is held as part of the Clinic. The services of consultants are available for any practitioners who require them, either at hospital out-patient departments, or, if a patient is unfit to travel, in the patient's home. X-ray examinations are similarly available, though only at Hospitals.

Dental treatment of expectant mothers is arranged either by the County Dental Officers, or through private dental practitioners. An Ante-Natal Hostel with a limited number of beds is open at Brighouse for expectant mothers who require rest but not active medical treatment. Applications for admission are made through the Divisional Health Office.

Standard maternity outfits for use at confinements are provided free. Stocks are held by all midwives, and at the Divisional Health Office.

Expectant unmarried mothers can have the same help as married women, and in addition are helped by the appropriate religious Moral Welfare Associations who generally arrange for the confinement in one of their Homes. A special Health Visitor can be made available for unmarried mothers if there is need for her services.

Midwifery : The midwifery service is combined with the Home Nursing Service. Nurse-Midwives are available as follows :-

| | |
|---|----------------------|
| Grindleton : The Syke — three. | Tel. Chatburn 244. |
| Hellifield : Central Mews — one. | Tel. Hellifield 214. |
| Settle : 4, Ingfield Estate — one. | Tel. Settle 2155. |
| Ingleton : Hollybank — two. | Tel. Ingleton 254. |
| Bentham : Ashfield House — one. | Tel. Bentham 291. |
| Sedbergh : 2, Havera, — two. | Tel. Sedbergh 138. |
| Kettlewell : Manor View — one. | Tel. Kettlewell 250. |
| (for Littondale, by arrangement with Division 1, Skipton) | |

All the midwives are equipped with apparatus for giving analgesia, and are trained in its use. Opportunities to attend refresher courses on all branches of their work are regularly offered.

One premature baby outfit is held ready for emergency use, and selected midwives are trained in the care of premature babies. Where the admission of a premature baby to hospital is necessary, it is arranged in the usual way.

Arrangements for admission to hospitals for confinements are made through the Divisional Health Office. It is essential to apply early. Cawder Ghyll Maternity Home, Skipton, and Bramley Meade, Whalley, take most of the cases from this Division ; but beds have been booked in Skipton General Hospital, in St. John's Hospital, Keighley, and in Keighley Victoria Hospital ; sometimes even further afield. There is a private Nursing Home at Long Preston which takes a certain number of maternity cases.

Five beds in the ex-Isolation Hospital at Harden Bridge have been allotted for maternity cases, but arrangements for equipping and staffing them have still to be made.

Post-Natal Care : There is limited accommodation in the Yorkshire Home for Mothers and Babies at Harrogate for mothers suffering from the after effects of childbirth, and for babies over three weeks and under seven months old. The Home is closed in the winter. Applications for admission can be made through the Divisional Health Office.

Child Welfare : Child Welfare Centres with doctor and Health Visitor in attendance are open at the following places :

| |
|--|
| Bentham : Town Hall, on alternate Tuesdays from 2 — 4 p.m. |
| Ingleton : Literary Institute, on alternate Tuesdays from 2 — 4 p.m. |
| Settle : St. John's Methodist School, on alternate Thursdays from 2 — 4 p.m. |
| Waddington : St. Helen's School, on alternate Thursdays from 2 — 4 p.m. |
| Gisburn : Village Hall, on alternate Tuesdays from 1-30 to 3-30 p.m. |
| Sedbergh : Masonic Hall, on 1st and 3rd Wednesdays from 1-30 to 3-30 p.m. |

At all centres Dried Milk, Vitamin preparations, and other Welfare Foods are sold at reduced prices. At the Ingleton centre voluntary workers also distribute Ministry of Food products.

Details of the work done at the centres are given in Appendix III.

A mobile clinic is necessary if the needs of a wholly rural division like this are to be fully met. This is realised and accepted by the County Council, but as yet no provision has been made.

There is limited accommodation for children up to five years of age in a Residential Nursery at Leadenhall Grange, Harrogate. Applications for admission are dealt with at the Divisional Health Office.

Health Visiting : There are wholetime Health Visitors for all parts of the Division except Bentham, where the duties of Health Visitor are combined with those of the Nurse-Midwife. Besides their duties in connection with babies and toddlers, the Health Visitors act as School Nurses, supervise the working of the Home Help Service, undertake the care of the Aged, act as Tuberculosis Health Visitors, follow up patients discharged from hospital if so requested, and provide reports on the social circumstances of applicants for hospital confinement. They are given regular opportunities to attend refresher courses, either general courses or courses in one particular aspect of their work. Every month they attend a lecture or a demonstration arranged by the Superintendent Health Visitor at Wakefield.

School Medical Service : A full inspection was carried out. On the whole the health and nutrition of the children was good ; but in some of the remoter dales there is still a reluctance to give children fresh salads, or green vegetables, or raw fruit and there is slight qualitative malnutrition in consequence.

Any defects found are notified to the general practitioner concerned, and when necessary, specialist opinion is obtained. The County Ophthalmologist visits the Division regularly once a month. A School Dental Officer was appointed in April, and is successfully overtaking the arrears of work that accumulated when the School Dental Service broke down in 1948. A Speech Therapist holds a class at the Divisional Office every Tuesday morning, and on Saturday mornings for selected children. From time to time a Breathing Exercises Class has been arranged, when the numbers of children requiring this training and able to attend in Settle justified it. Children in need of such guidance have been referred to the Child Guidance Centre opened this year in Skipton.

Details of work done are found in Appendix IV.

Home Help Service : At the end of the year 28 Home Helps were available, none in Bowland R.D., 16 in Sedbergh R.D., 12 in Settle R.D. To obtain the services of a Home Help, application should be made to the Divisional Health Office on a form obtainable there. The service is free to those who cannot afford to pay for it ; those who can afford to pay are required to do so, in part or in whole according to their means.

In allotting Home Helps priority is given to confinement cases and to acute emergencies, but an increasing demand is coming from aged and infirm people, and from the chronic sick. If enough Home Helps could be recruited in those parts of the Division which are now badly supplied twice the amount of work could be done. There is a known unsatisfied demand, and sometimes Help has had to be rationed when one knew that rationing was causing hardship. The present establishment is 11 full time Home Helps, or their equivalent in part time Home Helps. At need limited additional helps can be got from the County reserve.

Care of the Aged : Hostels are available in the West Riding for such aged persons as require no special medical or nursing care and can look after themselves reasonably well. For those who are infirm as well as old, or for the chronic sick, there is no adequate provision. It is very difficult indeed to get such patients into Hospital and the word "incontinence" closes almost every hospital door.

Official Welfare Schemes can do much for old people, and could do more : but the greatest need is for the frequent small personal services that only voluntary help can provide. Co-operation is kept with all the Voluntary Committees for the Welfare of the Aged that have been set up in the Division, for their work is of the greatest value. They need all the help they can get, not only financially, but by personal service. It is good to give half a crown, or to attend a social or a whist drive ; but it is far better and far harder to undertake a weekly visit to one lonely, complaining, ungrateful, smelly old man, and to try to make him feel that he still has somebody who is interested in him.

Prevention, Care and After Care : Nurses and Health Visitors are available to carry out care and after care when Hospitals ask for this to be done. Except for Mental Hospitals, and except where school children are concerned Hospitals seem to be either unaware that this service exists, or unwilling to use it. Some doctors seem to be inhibited by a narrow view of professional secrecy from giving the Health Department any information about their patients, even when it is in the patient's interest, and sometimes in the Public interest as well, that this information should be given. For example, patients are discharged from sanatoria, and the Medical Officer of Health is informed of the discharge, but not whether the patient is infectious to others or not, or what particular help he still needs.

For the prevention, care and after care of tuberculosis liaison is kept with the Chest Physician, Dr. W. D. Hamilton. The Chest Physician is, or ought to be, informed of the occurrence of tuberculosis, or of suspected tuberculosis, by general practitioners, to whom in turn he offers his help. The M.O.H. also reports cases to the Chest Physician, though it is most unusual for a case to be notified to the M.O.H. before the Chest Physician has heard of it. The Chest Physician in turn notifies the M.O.H. of all cases in which he is able to confirm the diagnosis. Before he confirms it, he requires very strict proof. The diagnosis of tuberculosis is a very serious matter for the patient. But a direct consequence of this policy is that by the time the M.O.H. is notified of the occurrence of a case a great deal of damage can be done. Three recently notified cases of pulmonary tuberculosis were all sputum positive, i.e. infectious to others. One was a bus conductor, the other two lived on farms where Tuberculin Tested herds were milked. Failure to notify cases early can be a very serious matter for the public. In my opinion, notification should be made as soon as there are reasonable grounds for believing that a condition is tuberculosis, not when certainty is at last reached : for until it is so made, prevention will be reduced to the shutting of doors on empty cages, the dangerous animals they once contained being at large amongst an unsuspecting public.

Tuberculosis after-care is carried out by the Health Visitors under the joint direction of the Chest Physician and the M.O.H. who also jointly arrange for extra nourishment, and for any other necessary and lawful provision that may help towards recovery. Admission to sanatoria is arranged by the Chest Physician, and the B.C.G. Vaccination of selected children is carried out by the Chest Physician, on behalf of and in co-operation with the M.O.H.

Care of the Blind : There are 54 registered blind persons in the Division. A Home Teacher of the blind visits those who can profit from her help.

Vaccination and Immunisation : Of 280 children born in 1951, only 67 had been vaccinated by the end of 1952, a dangerously low figure. No doubt outbreaks of smallpox can be quickly and effectively controlled, but it is better that outbreaks should never occur at all, and the best way of securing this is to maintain a high level of immunity to smallpox by means of vaccination. Vaccination is performed free by all general practitioners.

Of the same 280 children only 109 had been immunised against diphtheria by the end of 1952. Though a vigorous and successful campaign has been carried on to secure the immunisation of all school entrants, it is unsatisfactory to find so many younger children unprotected, for it is amongst them that the danger is

greatest. Thanks to the School Campaign I do not fear an epidemic, but I should be happier if no cases could occur at all. Immunisation is carried out free by general practitioners, by Child Welfare Centres, and by the School Medical Service. Some practitioners actively press for the immunisation of every young child in their practices, others only perform it if the mothers bring their children to the surgery and ask for it to be done. The latter group would only blame the mother, or the medical officer of health, if a child on their list died of diphtheria.

Immunisation against whooping cough has been carried out by most general practitioners for some time, but in the absence of comparable records no true judgement of the value of the procedure could be made though it was thought to be beneficial. In the latter half of 1952 an approved standard antigen was made available, and a system of record keeping was begun. In subsequent years a valid assessment of the results will be possible, and will be included in later Annual Reports.

Home Nursing : The Home Nursing Service is combined with the Midwifery Service. During the year 12,776 visits were paid to 782 patients. All the nurses are on the telephone, and emergency calls are attended to at all hours. If a patient's condition demands it, night visits are paid. Analysis of a random sample of nurses' weekly reports giving details of 967 visits shows that visits were made as follows :-

| | | |
|-----|-------------------|---|
| 141 | to sufferers from | Heart and Circulatory Diseases. |
| 109 | „ | Senility. |
| 104 | „ | Diabetes. |
| 96 | „ | Chest Diseases, including Tuberculosis. |
| 86 | „ | Locomotor System Diseases. |
| 78 | „ | Septic Conditions. |
| 74 | „ | Post Operative conditions. |
| 62 | „ | Central nervous system diseases. |
| 36 | „ | Anaemia. |
| 33 | „ | Vague and illegibly written complaints. |
| 28 | „ | Unclassified cancer. |
| 26 | „ | Injuries, including burns. |
| 22 | „ | Gastro-intestinal diseases. |
| 22 | „ | Eye, Ear, Nose and Throat diseases. |
| 15 | „ | Skin diseases. |
| 15 | „ | Gynaecological conditions. |
| 11 | „ | Infantile Convulsions. |
| 9 | „ | Genito-urinary diseases. |

The number of visits paid to diabetics seems at first sight to be surprisingly high. Most diabetics can be and are taught to give themselves their own injections of insulin ; but there are a few patients, old and feeble for the most part, who are quite unteachable and if nursing help is withdrawn they fall into coma.

Ambulance Service : Ambulances are provided at the following centres :-

Clitheroe : Tel. Clitheroe 154.
Sedbergh : Tel. Sedbergh 49 (Day) 67 (Night).
Settle : Tel. Settle 3194.

Many of the ambulances are equipped with wireless telephones, and can be diverted at need to deal with an emergency or to collect an extra patient.

Mental Health Service : A Social Worker in Mental Health is shared by this Division and No. 1 (Skipton) Division. Regular inspections of mental defectives are carried out, and touch is kept with Mental Hospitals to which patients are sent and from which they are discharged. There is great need for more hospital beds for mental defectives, especially for those most severely afflicted, and for those with physical defects as well as mental limitations. These latter are especially to be pitied. The mental defective institutions can not take them because they are physically handicapped, and the institutions for the physically handicapped can not take them because they are mentally defective ; yet their need for care is greater, not less, than the need of those who contend with only one disability.

An occupational therapy class for mentally defective children is held in the Divisional Office on four afternoons a week. Older mental defectives are trained, by arrangement with Castleberg Hospital, in the occupational therapy workshop there ; and for those unable to attend any centre a home teacher of occupational therapy was provided in September.

Details of the work of the Mental Health Social Worker are given in Appendix V.

Health Education : The Child Welfare Clinics are the centres from which Health Education is chiefly spread, by means of poster displays, distribution of pamphlets, talks, and up to February the showing of Health Films. I greatly deplore the closing of the C.O.I. Film Units. Audiences were being attracted, interest was being roused, and most useful work was being done. Doctors, Health Visitors and Nurses all take part in the work of Health Education as part of their normal duties. Special attention has been paid to the problems of the prevention of accidents in the home and of clean food.

There is no branch of Health Work where the co-operation of the General Practitioner would be so welcome, and so valuable. It is idle for the Health Visitor to urge breast feeding if the family doctor puts the baby on the bottle at the least sign of difficulty

or reluctance ; or for the M.O.H. to advocate immunisation against diphtheria if the practitioner is apathetic about it. The greatest need for Health Education may well be amongst the ranks of the Medical profession, and the true enemy of progress is not ignorance, but inertia.

I am, Sir,

Your Obedient Servant,

D. P. LAMBERT.

SANITARY INSPECTOR'S REPORT

Bowland

Mr. Chairman, Ladies and Gentlemen,

I hereby submit for your consideration my annual report for the year 1952.

Notices Served : The labour and materials position is now somewhat easier, but costs of repairs are still very high. Most of the outstanding notices are those served in the last month of the year.

Notifiable Diseases : There was a small epidemic of measles during the spring, particularly in certain areas. The village school at Gisburn was disinfected throughout in April.

Tents, Vans and Sheds : The slight increase in moveable dwellings in this area is probably due to some extent to influx of workers on the Haweswater Aqueduct.

In four instances it was necessary to take informal action on owners of caravans who had overstayed the statutory period.

One small weekend dwelling which had become very dilapidated was taken down and the site cleared.

Rivers and Streams : The only complaints from the River Board have been in regard to our Waddington, Grindleton and Gisburn Sewage Works effluents. Improvements to these works are intended to be carried out at an early date.

Milk Retailers : All the retailers in the area are producer-retailers over which the Local Authority's powers are now limited.

Inspections however have been made, and 10 samples of milk were tested for cleanliness, these were found to be satisfactory. 14 samples were biologically examined for the presence of tuberculosis, all of them were found to be free from infection.

Water Supplies

Water supplies in the District are distributed by the Council in five parishes and by private estates and companies in eleven parishes.

Rimington : A 600 yard extension of the Council's Rimington main has been carried out, and water is now supplied to 10 houses at Newby. Previously all the householders in Newby had to carry spring water from a standpipe at the bottom of the village.

Slaidburn : This supply, which is now hill stream water, treated by chlorination, has with one exception maintained a suitable standard of purity throughout the year. This exception was caused by the water intake pipes to the chlorinator becoming choked. The matter on being reported was remedied forthwith.

Gisburn : In early August, due to sudden heavy demands made on the supply by short stay visitors, the water level in the storage tanks dropped alarmingly.

Quick action by the Council's Surveyor's Department, whereby in three days some 20,000 gallons of water were brought by tanker from West Bradford and pumped into the storage tanks, saved the village from shortage at a most vital weekend period.

Housing : 1952 has been a more progressive year in housing. 36 new houses have been built ; 32 by the Council and 4 by private enterprise. One large house at Newton has been divided to make two separate dwellings.

One overcrowding case which was outstanding at the end of 1951, and five new cases which were discovered during the year have all been relieved by re-housing the occupants in Council Houses. There is still one rather serious case of overcrowding at Dunsop Bridge, but it is proposed to provide better accommodation for this family early in the new year.

One house at Bolton-by-Bowland, and one at West Bradford which in their present state, are unfit for human habitation, have been closed by their respective owners, pending negotiations as to costs of repairs.

The site of the 4 bungalows at Slaidburn, which were partially demolished in 1951, has now been cleared.

Slaughterhouse and Food Inspection : The Ministry of Food's subsidiary Slaughterhouse at Withgill has been used throughout the year for the slaughtering of pigs.

Other meat is sent into the area from the Public Abattoirs at Clitheroe and Skipton.

The following table gives details of pigs slaughtered and meat condemned :-

CARCASES INSPECTED AND CONDEMNED

| | | | | Cattle including Cows | Cows | Calves | Sheep and Lambs | Pigs |
|--|----|----|----|-----------------------------|------|--------|-----------------------|------|
| Number killed (if known) | .. | .. | .. | — | — | — | — | — |
| Number inspected | .. | .. | .. | — | — | — | — | 777 |
| All diseases except Tuberculosis | | | | | | | | |
| Whole carcasses condemned | | .. | | — | — | — | — | 11 |
| Carcasses of which some part or organ was condemned | | .. | | — | — | — | — | 8 |
| Percentage of the number inspected affected with disease other than tuberculosis | .. | .. | .. | — | — | — | — | 2.4 |
| Tuberculosis only | | | | | | | | |
| Whole carcasses condemned | | .. | | — | — | — | — | 1 |
| Carcasses of which some part or organ was condemned | .. | .. | | — | — | — | — | 17 |
| Percentage of the number inspected affected with tuberculosis | | .. | | — | — | — | — | 2.3 |

Food Production Including Ice Cream : Frequent visits of inspection have been made to this type of business. Distribution of copies of the Byelaws and also of Codes of Practice has been continued. In three cases defects were found, two of which were remedied forthwith.

21 samples of ice cream have been submitted for analysis, 20 of these were found to be satisfactory.

Rodent Control : Farm premises, private houses, workmen's camps, and Council's property, have all received disinfestation treatment, and very few complaints have been received.

A curious incident was reported by the Rodent Operative whilst he was disinfesting the Gisburn tip. A number of rats were seen to come from the tip face, climb up nearby hawthorn bushes, and feed on the berries. This occurrence was probably due to shortage of food in the tip itself. After the treatment 134 bodies were picked up.

Scavenging : Scavenging is done by the Council in portions of 17 of our 19 parishes. The work is done in a satisfactory manner and very few complaints have been received.

The scavenging of some 30 small bungalows, owned by the Waddington Hospital Trust has been undertaken this year as an addition to the service.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,

R. R. OVEREND, M.R.S.I., M.S.I.A.

SEDBERGH

Mr. Chairman, and Gentlemen,

In presenting details of the Annual Report, I would refer briefly to the following matters :-

Water Supplies : No difficulty in maintaining the supply in any of the three distribution supplies for which the Council is responsible has been experienced during the past year.

It is a matter to be regretted, however, that no works of repair or improvement have as yet been carried out at the Sedbergh reservoirs — Storage and Service — as advocated in a report to the Council from their Consulting Engineers.

The unsatisfactory position as regards the water supply to the hamlet of Slack (5 houses) continues to cause uneasiness, and while it is agreed that this Council shall provide an adequate piped supply to this group of houses, the question whether the Council should embark upon a much larger scheme for the purpose of augmenting the supply to a number of farms in this vicinity, is receiving attention.

Dent Water Supply : The Chlorination house and plant have been installed on this supply, and chlorination commenced on the 18th July. This has resulted in an improvement in the quality of the water — an improvement which is reflected in the satisfactory samples taken since that date.

Consistent sampling has also proved the Sedbergh Supply to be entirely satisfactory.

No major extensions to any mains have been carried out during the past year by the Council.

Extensive improvements to one public supply (privately owned) — the owners being the British Railways — have, however been carried out at Garsdale, where upland streams supply sixteen houses owned by British Railways.

These improvements include the re-siting of the existing chlorination plant, and the installation of “Permutit” Pressure Filters, together with an Alum Feeder. This constitutes a marked improvement on conditions previously existing.

Sewers and Sewage Disposal : No Sewage works extensions have been carried out during the past year, minor improvements only having been effected.

The Council have not as yet, decided to take over the recently installed works at Garsdale owned by British Railways, this decision having been postponed for one year.

The Council have, however, taken over from the Ministry of Works the existing works which take sewage from 36 Bungalows at Pinfold, Sedbergh.

On taking this plant over it was found that one distributor was completely out of action, and the other in very poor condition.

As, with the building of new houses, this estate is being gradually vacated and it is not proposed to redevelop on the site, it was decided that one complete distributor only should be renewed. This was accordingly done, the opportunity being taken to carry out repairs to the scum boards and also to fencing surrounding the works. The Settling Tanks and Humus Tanks were also emptied, a cesspool emptier being hired from the Ministry of Works for this purpose.

Trade Effluent — Drainage of Trade Premises Act, 1937 : It having been proved that a quantity of trade effluent was being discharged into the Sewers from a small woollen mill without authority samples of the resultant effluent were taken at the sewage works, Sedbergh, and an agreement decided upon as between the occupier of the mill and the Council setting out the maximum quantity to be discharged into the Sewer in any one day, and also governing its rate of discharge into the Sewers.

Separate Drainage System — Sedbergh : Amongst improvements carried out during the past year, the drainage from four premises, 3 in Finkle Street and one in Main Street proved as being wrongly connected to the surface water system, were cut off and re-connected to the main sewer.

Sedbergh Sewage Works : Serious flooding and consequent overloading of the above works continues to occur after heavy rain, and the need for further provision for storm over-flow is vital for the efficient running of these works.

Housing : Progress in the erection of Council Houses was continued during the year, twelve houses at Long Lane, Sedbergh, being completed and occupied, and also eight at the Dragon Croft Site, Dent.

Twenty-six houses on the Cautley Road site at Sedbergh are also well in hand, and it is anticipated that these will be occupied early in the forthcoming year.

Site plans are also in preparation for the re-development of the Maryfell Site, the intention being to provide one hundred units of accommodation on this Site.

Milk Supply : There is one retailer of T.T. milk in this area (non

producer). Three samples of milk and one of cheese have been taken for baeteriological analysis during the year — all proved satisfactory.

Food Supply, Slaughter Houses and Food Inspection : All meat is imported into this area from the Central Slaughter House at Kendal and has continued to be satisfactory.

Rats and Mice Destruction : Routine disinfestation of the Council's Central and emergency refuse tips have been carried out through the year with satisfactory results.

Scavenging and Cleansing : One further extension to the Seavenging Area already covered by the Council's Collection System has been made during the past year. This is the area covered by properties abutting onto or adjacent to the roadside between Sedbergh and Howgill Village.

The areas covered include : Sedbergh, Dent, Lea Yate, Slack, Gawthrop, Garsdale and Howgill, with the intervening roadside properties. Collections are : Sedbergh and Dent weekly, Lea Yate, Slack, Gawthrop and Garsdale fortnightly and Howgill monthly.

I am, Gentlemen,

Yours faithfully,

FRED LAWSON.

SETTLE

Mr. Chairman and Gentlemen,

I would bricfly refer to the following matters which were of interest during the year.

Drainage and Sewerage : At Horton in Ribblesdale the Ministry approved a modified scheme for the sewerage of the area near the station and it is hoped to advertise for tenders early in the new year, whilst at Burton in Lonsdale the sewer was extended for the old and new housing sites.

Refuse Collection and Disposal : The total cost of refuse collection and disposal is now about £4,800 per annum. Twelve men and three vehicles are fully employed, refuse being collected approximately every ten days from all the populated areas of the district. The tips at Bentham, Ingleton and Wigglesworth continue to be the main sites of disposal.

Water Supplies : The new scheme at Helwith Bridge was completed during the year and the use of the old windmill supply was discontinued.

Following the inquiry by the Ministry into the Council's proposal to take water from Turbary for the Masongill/Westhouse supply, the Ministry suggested a further approach to the objecting riparian owner but no agreement had been reached at the year end.

Ninety-five samples of water were sent for examination.

Food Supplies : During the year Two Hundred and Seventy-eight visits were made to the Ministry of Food Slaughterhouse at Settle where the arrangements for slaughtering were carried out as in previous years.

The following tables shows the number of animals killed and those affected with disease.

| | | | Cattle excluding Cows | Cows | Calves | Sheep and Lambs | Pigs |
|---|----|----|-----------------------------|-------|--------|-----------------------|------|
| Numbers killed | .. | .. | 645 | 99 | 21 | 2707 | 188 |
| Numbers inspected | .. | .. | 645 | 99 | 21 | 2707 | 188 |
| All Diseases except Tuberculosis : | | | | | | | |
| Whole carcasses condemned | | | 6 | 10 | 13 | 57 | 4 |
| Carcasses of which some part or organ was condemned | .. | | 264 | 65 | 1 | 113 | 1 |
| Percentage of the number inspected affected with diseases other than T.B. | .. | .. | 41.9% | 75.8% | 66.6% | 6.3% | 2.7% |
| Tuberculosis Only : | | | | | | | |
| Whole carcasses condemned | | | 3 | 3 | — | — | 3 |
| Carcasses of which some part or organ was condemned | .. | | 64 | 28 | — | — | 3 |
| Percentage of number inspected affected with Tuberculosis | .. | | 10.4% | 31.3% | — | — | 3.2% |

Steady progress was made in the inspection of food premises

Tents, Vans and Sheds : Three licensed sites in the district were well conducted, inspections showing sanitary arrangements to be satisfactory. There were the usual difficulties with the odd caravans stationed for short periods in various parts of the district but no statutory action was necessary.

Housing : Twenty-two Council houses were completed during the year and eight were erected by private enterprise. Three additional dwellings were also provided with the aid of Improvement Grants under the Housing Act, 1949.

Two houses in Well Hill, Settle, were the subject of notices under Section 11, of the Housing Act, 1936, but action was not complete at the year end.

The following table shows the position regarding statutory overcrowding at the end of the year.

| | |
|--|---------|
| Number of dwellings overcrowded at the end of the year |12 |
| Number of families dwelling therein |19 |
| Number of persons dwelling therein |89 |
| Number of new cases of overcrowding reported during the year | 7 |
| Number of cases of overcrowding relieved during the year | 3 |
| Number of persons concerned in such cases |18 |

Staff : Mr. B. Robinson, Second Sanitary Inspector, left the service of the Council to take up an appointment with the Wincanton R.D.C. and Mr. F. Smith of Bingley was appointed to the position in November.

N. FIRTH,

Senior Sanitary Inspector.

SANITARY INSPECTOR'S REPORTS : STATISTICAL ABSTRACT

| | | | | | Bowland | Sedbergh | Settle |
|--|----|----|----|----|---------|----------|--------|
| NOTICES SERVED | | | | | | | |
| Statutory Notices Served | .. | .. | .. | .. | — | 4 | 4 |
| Statutory Notices Complied with | | | | .. | — | 3 | 3 |
| Informal Notices Served | .. | .. | .. | .. | 95 | 3 | 53 |
| Informal Notices Complied with | .. | .. | .. | .. | 84 | 2 | 30 |
| NOTIFIABLE DISEASES | | | | | | | |
| Inspections made | .. | .. | .. | .. | 15 | 8 | 39 |
| Disinfections carried out | .. | .. | .. | .. | 12 | 6 | 10 |
| PUBLIC HEALTH NUISANCES | | | | | | | |
| Inspections made | .. | .. | .. | .. | 125 | 53 | 99 |
| Nuisances found | .. | .. | .. | .. | 78 | 1 | 50 |
| Nuisances abated | .. | .. | .. | .. | 74 | — | 48 |
| OFFENSIVE TRADES | | | | | | | |
| Registered premises | .. | .. | .. | .. | 1 | — | — |
| Inspections made | .. | .. | .. | .. | 7 | — | — |
| Unsatisfactory conditions found | .. | .. | .. | .. | — | — | — |
| TENTS, VANS AND SHEDS | | | | | | | |
| Inspections made | .. | .. | .. | .. | 36 | — | 12 |
| Unsatisfactory conditions found | .. | .. | .. | .. | 4 | — | — |
| RIVERS AND STREAMS | | | | | | | |
| Complaints from Rivers Pollution Board | .. | .. | .. | .. | 2 | — | — |
| Inspections made | .. | .. | .. | .. | 10 | — | — |
| Unsatisfactory conditions found | .. | .. | .. | .. | 2 | — | — |
| BAKEHOUSES | | | | | | | |
| Registered Bakehouses | .. | .. | .. | .. | 3 | 5 | 14 |
| Inspections made | .. | .. | .. | .. | 4 | 6 | 21 |
| Unsatisfactory conditions found | .. | .. | .. | .. | — | — | — |
| SHOPS ACT 1934 | | | | | | | |
| Registered Premises | .. | .. | .. | .. | 50 | 53 | 233 |
| Inspections made | .. | .. | .. | .. | 42 | 8 | 112 |
| Unsatisfactory Conditions found | .. | .. | .. | .. | — | — | — |
| MILK RETAILERS | | | | | | | |
| Registered Milk Retailers | .. | .. | .. | .. | — | 1 | 43 |
| Inspections made | .. | .. | .. | .. | 27 | 12 | 51 |
| Unsatisfactory Conditions found | .. | .. | .. | .. | 1 | — | — |
| HOUSING | | | | | | | |
| Inspections made | .. | .. | .. | .. | 270 | 232 | 174 |
| Unsatisfactory conditions found | .. | .. | .. | .. | 95 | 86 | 95 |
| New Cases of overcrowding | .. | .. | .. | .. | 5 | 2 | 7 |
| New houses erected | .. | .. | .. | .. | 37 | 20 | 30 |
| Licenses issued for housing, including repairs | .. | .. | .. | .. | 22 | — | 22 |
| DRAINAGE AND CLOSET ACCOMMODATION | | | | | | | |
| Inspections made | .. | .. | .. | .. | 137 | 122 | 170 |
| Unsatisfactory conditions found | .. | .. | .. | .. | 62 | 22 | 47 |
| Repairs to drains, including clearing | .. | .. | .. | .. | 40 | 25 | 47 |
| New septic tanks built | .. | .. | .. | .. | 9 | 6 | 6 |
| Closets improved | .. | .. | .. | .. | 22 | 10 | 5 |

| SLAUGHTER HOUSES AND FOOD INSPECTIONS | | | | | Bowland | Sedbergh | Settle |
|---------------------------------------|----|----|-------|----|---------|----------|--------|
| Licensed Slaughter houses | .. | .. | | | 3 | — | 1 |
| Inspections made | .. | .. | .. | .. | 77 | 12 | 178 |
| Amount of Food condemned in lbs. | | | | | | | |
| | | | Meat | .. | 2755 | — | 26656 |
| | | | Fish | .. | 1 | — | — |
| | | | Other | .. | 44 | 198 | 174 |
| FOOD PRODUCTION, INCLUDING ICE CREAM | | | | | | | |
| Premises registered | .. | .. | .. | .. | 56 | 11 | 52 |
| Inspections made | .. | .. | .. | .. | 113 | 11 | 47 |
| Unsatisfactory Conditions found | .. | .. | | | 3 | — | — |
| Samples taken | .. | .. | .. | .. | 21 | — | 20 |
| FACTORIES ACT | | | | | | | |
| Registered Premises | .. | .. | .. | .. | 29 | 32 | 134 |
| Inspections made | .. | .. | .. | .. | 25 | 8 | 30 |
| Unsatisfactory conditions found | .. | .. | | | — | — | — |
| RODENT CONTROL | | | | | | | |
| Inspections made | .. | .. | .. | .. | 96 | 28 | 151 |
| Sites test baited | .. | .. | .. | .. | 15 | 12 | 15 |
| Maintenance treatments carried out | .. | | | | 9 | 12 | 56 |
| SCAVENGING | | | | | | | |
| Inspections made | .. | .. | .. | .. | 131 | 37 | 154 |
| Unsatisfactory conditions found | .. | .. | | | 16 | — | 32 |
| New refuse bins provided | .. | .. | | | 53 | 18 | — |

APPENDIX II

BOWLAND

WATER SUPPLIES :: ANALYST'S REPORTS PUBLIC WATER SUPPLIES (Council Owned)

BACTERIOLOGICAL REPORTS

| | | | | | Satisfactory | Unsatisfactory |
|------------------|----|----|----|----|--------------|----------------|
| Gisburn | .. | .. | .. | .. | 3 | — |
| Grindleton | .. | .. | .. | .. | 4 | — |
| Newton | .. | .. | .. | .. | 3 | — |
| Rimington | .. | .. | .. | .. | 3 | 1 |
| Tosside | .. | .. | .. | .. | 4 | — |
| | | | | | — | — |
| | | | | | 17 | 1 |
| | | | | | — | — |
| Chemical Reports | .. | .. | .. | .. | — | — |

BACTERIOLOGICAL REPORTS

| | | | | | | |
|-----------------------------|----|----|----|----|----|---|
| Bashall Eaves | .. | .. | .. | .. | 2 | 1 |
| Bolton-by-Bowland | | .. | .. | .. | 3 | — |
| Dunsop Bridge | .. | .. | .. | .. | 3 | — |
| Holden | .. | .. | .. | .. | 3 | — |
| Horton | .. | .. | .. | .. | 3 | — |
| Mitton | .. | .. | .. | .. | 4 | — |
| Sawley | .. | .. | .. | .. | 2 | — |
| Slaidburn | .. | .. | .. | .. | 4 | 2 |
| Waddington | .. | .. | .. | .. | 3 | — |
| West Bradford (Tagglesmire) | .. | .. | | | 2 | 1 |
| West Bradford (Mains) | .. | .. | .. | | 3 | — |
| | | | | | — | — |
| | | | | | 32 | 4 |
| | | | | | — | — |
| Chemical Reports | .. | .. | .. | | — | — |

PRIVATE WATER SUPPLIES (Single Properties)

BACTERIOLOGICAL REPORTS

| | | | | | | |
|-------------|----|----|----|----|----|----|
| All sources | .. | .. | .. | .. | 11 | 10 |
|-------------|----|----|----|----|----|----|

SEDBERGH

SUMMARY OF WATER ANALYSES, 1952

Samples taken for bacteriological analysis :-

| | No of samples taken | Satisfactory | Unsatisfactory |
|--|---------------------------|--------------|----------------|
| Public Water Supplies (Council Owned) | 16 | 16 | NIL |
| Public Water Supplies (Privately Owned) | NIL | NIL | NIL |
| Private Water Supplies (Single Properties) | 15 | 9 | 6 |
| | — | — | — |
| Total | 31 | 25 | 6 |
| | — | — | — |

Chemical Analyses — NIL.

SETTLE

WATER SUPPLIES — BACTERIOLOGICAL ANALYSIS REPORTS

| | Satisfactory | Unsatisfactory |
|--|--------------|----------------|
| Airton.. .. . | — | 4 |
| Austwick | — | 1 |
| Bentham (High) | 3 | 2 |
| Bentham (Low) | 1 | — |
| Burton in Lonsdale | 1 | 1 |
| Clapham | — | 1 |
| Cold Cotes.. .. . | — | 1 |
| Hellifield | 4 | 4 |
| Horton in Ribblesdale | — | 2 |
| Helwith Bridge | — | 10 |
| Ingleton | 2 | 4 |
| Keasden | 1 | — |
| Kirkby Malham (Stand Pipe) | — | 1 |
| Kirkby Malham (Proctors) | — | 1 |
| Langcliffe | 2 | 4 |
| Long Preston | — | 4 |
| Malham (Atkinsons) | 1 | — |
| Malham (Hanlith) | — | 1 |
| Masongill | — | — |
| Newby | — | 1 |
| Otterburn | — | 3 |
| Rathmell | — | — |
| Settle (High Level) | 7 | 1 |
| Settle (Low Level) | 5 | — |
| Stainforth | — | 3 |
| Westhouse | — | — |
| Turbary | — | 1 |
| Private Supplies Single properties | 9 | 7 |

APPENDIX III

ATTENDANCE AT CHILD WELFARE CENTRES

| Centre | Children Under 1 year | Children 2—5 years |
|--------------------|--------------------------|-----------------------|
| Bentham | 259 | 124 |
| Gisburn | 27 | 120 |
| Ingleton | 174 | 400 |
| Sedbergh | 217 | 237 |
| Settle | 252 | 172 |
| Waddington | 185 | 286 |

APPENDIX IV

RESULTS OF SCHOOLS INSPECTION

| DEFECT OR DISEASE | Periodical | Inspections | Special | Inspections |
|-----------------------------|------------------------|--------------------------|------------------------|--------------------------|
| | Requiring Treatment | Requiring Observation | Requiring Treatment | Requiring Observation |
| SKIN | 20 | 7 | 9 | 2 |
| EYES : (a) Vision | 76 | 37 | 43 | 19 |
| (b) Squint | 4 | 3 | 3 | 3 |
| (c) Other | 5 | — | 3 | 2 |
| EARS : (a) Hearing | — | 2 | 4 | 1 |
| (b) Otitis Media | 5 | 6 | 1 | 3 |
| (c) Other | 1 | 3 | 1 | 1 |
| NOSE OR THROAT | 32 | 58 | 23 | 25 |
| SPEECH | 6 | 6 | 4 | 3 |
| CERVICAL GLANDS | 2 | 7 | 4 | 3 |
| HEART & CIRCULATION | 6 | 36 | 4 | 27 |
| LUNGS | 11 | 37 | 9 | 40 |
| DEVELOPMENT : | | | | |
| (a) Hernia | — | 1 | — | — |
| (b) Other | 2 | 3 | 2 | 2 |
| ORTHOPAEDIC : | | | | |
| (a) Posture | 4 | 14 | 7 | 5 |
| (b) Flat Foot | 16 | 17 | 10 | 5 |
| (c) Other | 10 | 10 | 3 | 10 |
| NERVOUS SYSTEM : | | | | |
| (a) Epilepsy | — | — | 3 | — |
| (b) Other | — | — | — | 1 |
| PSYCHOLOGICAL : | | | | |
| (a) Developmental | 3 | 13 | 3 | 12 |
| (b) Stability | 4 | 12 | 3 | 16 |
| OTHER DEFECTS | 18 | 10 | 17 | 4 |

In 3757 examinations 46 pupils were found infested with vermin.

APPENDIX V.

LIST OF MENTAL DEFECTIVES AS AT DECEMBER 31st, 1953

| | | | | Under 16 | | Over 16 | |
|-------------------------------|--|--|--|----------|---------|---------|---------|
| | | | | Males | Females | Males | Females |
| Statutory Supervision | | | | 4 | 8 | 10 | 10 |
| Guardianship | | | | — | — | — | 2 |
| In Institutions | | | | 2 | 3 | 15 | 10 |

APPENDIX VI.

VITAL STATISTICS, 1952

| | Estimated Population | Births | | Deaths | | Deaths under 1 yr | | Stillbirths | |
|--|-------------------------|--------|----|--------|----|-------------------|----------|-------------|----|
| | | M. | F. | M. | F. | M. | F. | M. | F. |
| Bowland | 5,094 | 26 | 37 | 33 | 34 | 1 | 1 | — | 1 |
| Sedbergh | 3,852 | 25 | 22 | 25 | 23 | 1 | 1 | — | — |
| Settle | 14,230 | 92 | 88 | 82 | 77 | 2 | 3 | 4 | 7 |
| | | | | | | | | | |
| Chief Causes of Death | | | | | | Bowland | Sedbergh | Settle | |
| Infective diseases, excluding Tuberculosis | .. | | | .. | | — | — | 1 | |
| Respiratory Tuberculosis | .. | .. | | .. | | — | 1 | 1 | |
| Other Tuberculosis | .. | .. | | .. | | — | — | — | |
| Cancer and other malignant disease | .. | .. | | .. | | 10 | 7 | 19 | |
| Apoplexy and similar diseases | .. | .. | | .. | | 12 | 4 | 24 | |
| Coronary Disease | .. | .. | | .. | | 8 | 6 | 17 | |
| Other Heart and Circulatory Diseases | .. | .. | | .. | | 18 | 18 | 53 | |
| Pneumonia and other respiratory Diseases | .. | .. | | .. | | 1 | 2 | 11 | |
| Ulcers of stomach and duodenum | .. | .. | | .. | | 2 | — | 2 | |
| Congenital malformations | .. | .. | | .. | | 1 | — | 2 | |
| All other disease | .. | .. | | .. | | 9 | 8 | 20 | |
| Maternal Mortality | .. | .. | | .. | | — | — | — | |
| Accidents, Suicide and Murder | .. | .. | | .. | | 6 | 2 | 9 | |
| Total | | | | | | 67 | 48 | 159 | |

LIST OF STAFF

Chairman of Public Health Committee :

| | |
|----------|------------------|
| Bowland | W. PROCTOR, ESQ. |
| Sedbergh | W. BATTY, ESQ. |
| Settle | DR. W. A. HYSLOP |

Divisional Medical Officer

D. P. LAMBERT, M.D., D.T.M. & H., D.P.H.

Assistant County Medical Officer

R. R. STOAKLEY, M.B., B.CH.

Head Clerk

W. HOSSELL, ESQ.

Junior Clerks

J. CARR., B. M. NOWELL.

Social Worker in Mental Health

J. BARBER, S.R.N., S.C.M.

Senior Sanitary Inspectors

| | |
|----------|-----------------------------------|
| Bowland | R. R. OVEREND, M.S.I.A., M.R.S.I. |
| Sedbergh | F. J. LAWSON, M.S.I.A. |
| Settle | N. FIRTH, Cert. S.I.B. |

Assistant Sanitary Inspectors

| | |
|--------|---|
| Settle | B. ROBINSON, A.R. SAN. I. until October |
| Settle | F. SMITH from November. |

Health Visitors

| | |
|------------|--|
| Bowland | H. HAWORTH, S.R.N., S.C.M., H.V. |
| Sedbergh | S. A. SIMM, S.R.N., S.C.M., H.V. |
| Ingleton | E. WATTS, S.R.N., S.C.M., H.V. |
| Hellifield | R. C. DRUMMOND, S.R.N., S.C.M., H.V. |
| Settle | I. C. G. HARRISON, S.R.N., S.C.M., H.V. |
| Bentham | O. M. E. BOTTONE, S.R.N., S.C.M., H.V. (part time). |

